DOCUMENT RESUME

ED 158 876 PS 010 037

TITLE The Case Management Model: Concept and Process Definition. Volume I.
INSTITUTION Regional Inst. of Social Welfare Research, Athens, Ga.
PUB DATE 77
NOTE 32p.; For Volumes II and III, see PS 010 038-39

EDRS PRICE MF-$0.83 HC-$2.06 Plus Postage.
DESCRIPTORS *Caseworker Approach; *Delivery Systems; *Management Systems; *Models; *Social Services; Training

ABSTRACT

This report describes a case management model and was designed to serve as a basic text for training social service workers. Chapter I defines the term case management and discusses the role of case management in the field of social services. Chapter II delineates the main features of the case management model and the activities required of the social service worker in the case management process. Included in this chapter are a diagram illustrating the relationship of case management functions to other functions in the service delivery system and a flow chart demonstrating the functional flow of the case management process. Chapter III briefly discusses issues related to the implementation of the case management approach. (JMB)

****
* Reproductions supplied by EDRS are the best that can be made *
* from the original document. *
****

- ED158876 -

U.S. DEPARTMENT OF HEALTH,
EDUCATION & WELFARE
NATIONAL INSTITUTE OF
EDUCATION

THIS DOCUMENT HAS BEEN REPRODUCED EXACTLY AS RECEIVED FROM THE PERSON OR ORGANIZATION ORIGINATING IT. POINTS OF VIEW OR OPINIONS STATED DO NOT NECESSARILY REPRESENT OFFICIAL NATIONAL INSTITUTE OF EDUCATION POSITION OR POLICY

THE CASE MANAGEMENT MODEL: CONCEPT AND PROCESS DEFINITION

VOLUME I

1977

Regional Institute of Social Welfare Research, Inc.
Heritage Building - P.O. Box 152
Athens, Georgia 30603

"PERMISSION TO REPRODUCE THIS MATERIAL HAS BEEN GRANTED BY

Bernard D. Bonhorst

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC) AND USERS OF THE ERIC SYSTEM."

PS 010037

THE CASE MANAGEMENT MODEL: CONCEPT AND PROCESS DEFINITION

TABLE OF CONTENTS

		Page
Foreword		ii
Chapter I:	Introduction: Purpose and Background	1
Chapter II:	Case Management Defined	5
	. Main Features of the Process	5
	. Process Steps and Requirements	7
Chapter III:	Implementation of Case Management: Issues and Implications	19
Figures		
	. Hypothetical Service Delivery System Functions	5a
	. Case Management Process: Functional Flow	6a

Foreword

This is Volume I of a three-volume set designed to promote the implementation of a Case Management Model. The intention of this volume is to describe the model in as brief, and yet comprehensive, a way as possible. In this sense, it serves as a basic statement of the model and its background. From the standpoint of implementation, it is meant to be a basic text for both trainer and trainee. Aside from its function as a standard reference for all concerned, from the standpoint of the trainer Volume I complements the video-tapes and other materials which may be used in training.

The case management process is described in detail in Volume II, Implementation Requirements. Organized in line with the major steps of the case management process, this volume shares the reference purposes of Volume I. As such, it serves as a basic content for training.

Volume III is the Trainers' Guide. It is a "how-to" manual and workbook for trainers, containing instruction aids, suggestions and other group training recommendations. It is designed to be modular in application, each major step keyed to the Implementation Requirements manual and the video tapes.

The case management model represented in these volumes is the product of a variety of efforts. In the first place,

the conception of case management as an organizational principle and as a procedural guide is rooted in the day-to-day work of line agency staff.

During the past year or so, a number of projects involving the Regional Institute of Social Welfare Research (RISWR), Inc., and both county and state department staff have had the added effect of (a) sorting out system problems and (b) piecing together a case management approach. Consequently, case management results from a lot of diverse thinking on its subject.

It is beyond our scope to give all contributors their just due. However, given the extent of direct project involvements, special recognition must be given to the Work Training Representatives and Officers of the WIN Services Unit, Division of Social Services, Georgia Department of Human Resources (DHR). Under the leadership of Ms. Ellen Skinner, Chief of the WIN Services Unit, the project conditions and knowledgeable staff needed for examining the logic and feasibilities of case management were assured.

As to RISWR staff involvement, that too has been sizeable and difficult to place with precision. Assuming standard criteria, a number of individuals can be pointed out, including: Gerald V. Gouge, Daniel G. Boserup, William P. Sparrowhawk, and Grady L. Cornish.

A final word on implementation: While the general model has been derived from observations made and confirmed in the Georgia social service delivery system, it is not tailored to or limited to the Georgia scene. A related point is that the design departs from the complex implementation demands made by more highly structured models.

In effect, the model specifies a number of requirements which can be satisfied in various ways. Obviously, the extent to which requirements can in fact be met depends on a number of organizational and other inhibiting factors.

In the case of the Georgia Division of Social Services (DSS) there is nothing by way of policy or organization that runs counter to case management. By reason of its potential for rationalizing the interrelationships among clients, workers and supervisors, and because no policy exceptions are apparent, the Division has decided to disseminate the model as a guide for social workers in its line agencies. Even so, the model is not being fully implemented. Since other divisions of DHR are not making formal commitments to case management at this time, cases which involve services or actions outside of DSS can not be "managed" in accordance with the model's requirements. It remains possible, of course, for county staff who are trained in case management to pursue its aims beyond bureaucratic lines on at least an individual case basis.

Daniel G. Boserup

CHAPTER I

Introduction: Purpose and Background

Briefly defined, case management comprises a series of steps or activities which describe the interrelationships among service workers, agency administrators, service vendors and clients. Conceptually, and in systems terms, it is one of the essential functions of a service delivery system. In this context, and from the standpoint of individual service workers, it intends to give focus to a defineable order of events and staff responsibilities.

As to major purpose, case management is designed to make a difference in the organization and results of service provision on a case-by-case basis. In this sense, it falls within the broader aim of all agencies charged with a helping purpose, namely to treat all clients equitably, with dispatch, and with desirable result.

Given the disarray of social services, at the line agency level as well as the higher reaches of administration, it is improbable that these criteria are met with any consistency. In a sense, case management is a response to these much belabored circumstances. It is conceived as a general model made up of a series of steps and their interconnections. As such, it is represented as a set of requirements based on both (a) the logic of case handling in a supposed rational

environment of multiple service opportunities and/or needs and (b) the real world of professional blocs, limited resources, Catch-22 regulations, uncertain lines of authority, and bureaucratic in-fighting. Simply, the central idea of case management is to establish a definite frame of reference for service workers, supervisors, trainers, administrators and clients. To the extent allowed by policies, organizational preferences, and professional doctrine, the idea also is to standardize terminologies and procedures for relating to clients, service workers, and other case participants. In this way the model aims at the basic problem of integrating case actions and responsibilities, both vertically and horizontally (i.e., with people over whom there is no authority or control).

In the main, case management results from lessons learned from those it is intended to help most -- the front line service worker. As such, its basic formulations are derived from experience, particularly those instances of social service processing which strive for a systematic approach to dealing with the many dilemmas of service delivery and management.

Case management is not merely theoretical. As an idea and as a practical alternative to uncoordinated and undisciplined service activity it has been applied in a variety of circumstances and under numerous guises. Terms like programmer,

coordinator, broker, integrator and others have been used to describe the several models which have been attempted, chiefly at the line agency level.

While case management may mean different things to different people, it is commonly recognized as a way for addressing the many complications of "the system" in a manner that does not require radical change. Even though radical change (including the simplification and rationalization of policies, regulations, and rules) may be indisputably in order, it is also self-evident that such a dramatic turnabout will not take place. Instead we look for compromise solutions rather than all-out reorganization and reform. In this sense, while it is by no means an instant solution, case management is advanced as the best approach to establishing the routines and checkpoints necessary for guiding service delivery system case activities.

Finally, it should be mentioned that case management touches directly on the philosophy and methods of management by objectives (MBO). Setting objectives on a case-by-case basis and making the objectives work or finding out why they do not work, is a theme throughout the process. Also, the pin-pointing of responsibility and its definition is essential to case management operations.

In addition to this worker-oriented application, case management can become the organizational and operative basis for MBO and allied means of policy and work integration:

- For one thing, the process lays out and integrates the activities and tasks necessary for (a) defining job specifications and (b) accomplishing results.

- For another, it can serve to identify those factors (such as the need to rely on, and/or coordinate with, other staff in planning, arranging or providing services) which are at the root of determining the relative effectiveness and efficiency of programs and units.

- Also, by introducing structure and routine, and by locating case responsibilities within the boundaries set by agency policy and practice, case management requirements represent a basis for accountability (i.e., criteria selection and measurement), feedback and control.

Relatedly, but with separate emphasis, case management provides a frame of reference for responding to training and staff development needs. This means that the various steps and procedural requirements of the model can be used to organize and to format training content for (a) initial orientation and training or (b) remedial, staff development purposes.

CHAPTER II

Case Management Defined

Main Features of the Process

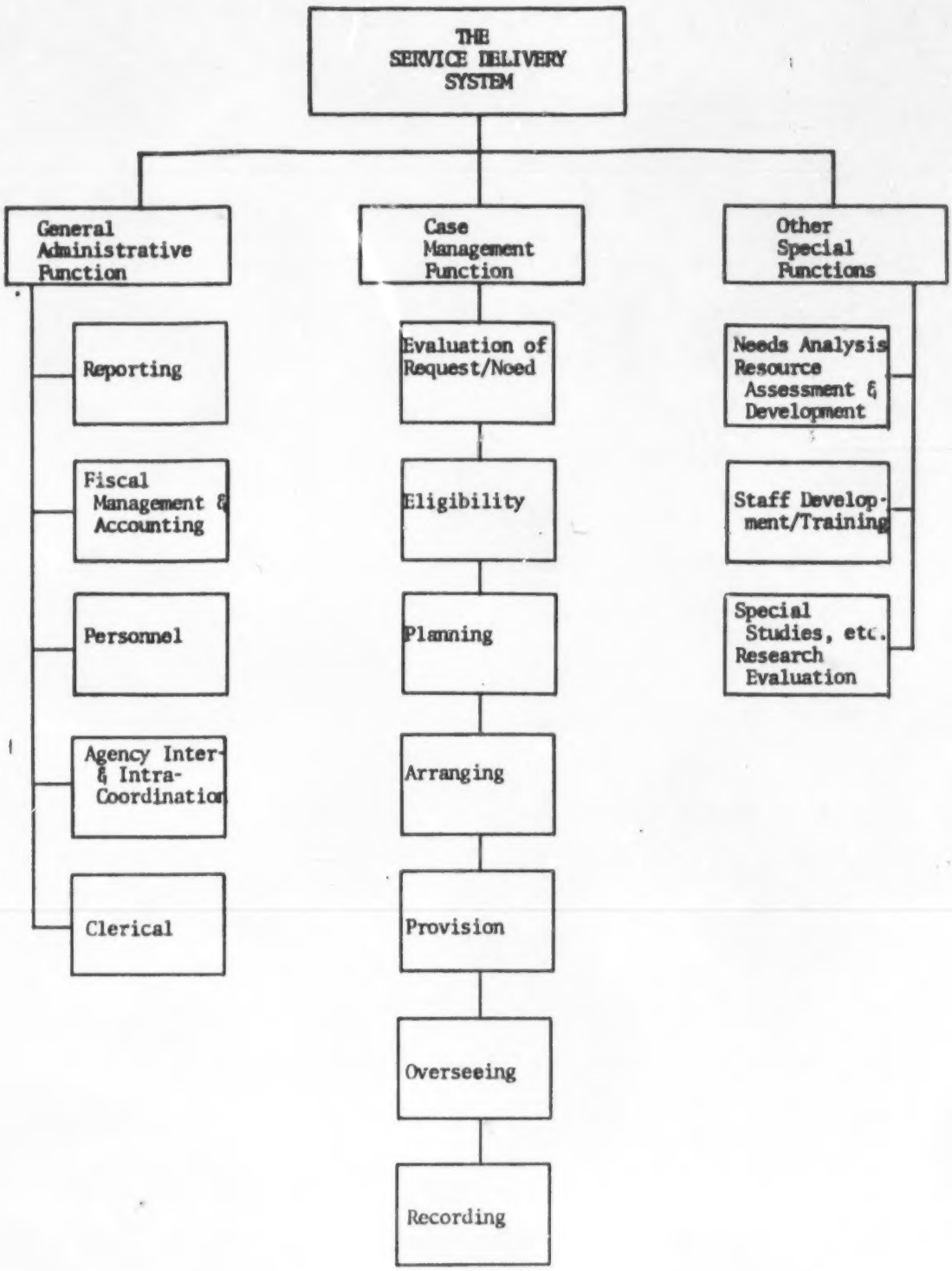
As explained at the outset, case management is best understood as a process made up of a series of interconnected steps. These steps reflect the various objectives of case management and, as such, constitute a framework for the activities and tasks which account for the agency/worker and client relationship. In this way, the process can function as a guide for making case decisions and for doing the job(s) required by the delivery system.

The case management process has been defined in contrast to other major service delivery system functions. This view gives a general system emphasis to the structure of case management. Also, as depicted in the highly simplified diagram (Figure 1), this functional approach conveys the basic requirements for case actions, decision-making, and for centralizing case responsibilities.

From the point of view of line agency staff case management is in the first place a statement of work responsibility. In addition to specifying decision points and interfaces on a case-by-case basis, its effect is to pull together plans and actions which, when completed, result in meeting case objectives.

FIGURE 1

HYPOTHETICAL SERVICE DELIVERY SYSTEM FUNCTIONS



This case-by-case emphasis does not mean a paternalistic, patronizing caseload approach. On the contrary, one of the essential methods of case management is the calculation of client needs and requests in terms of the concrete factors which affect the case and the agency's abilities to respond. The governing idea is to keep the program lines clear and relationships functional throughout the process.

The main lines or flows of the process are diagramed in Figure 2. This is a highly generalized and composite version of what is supposed to take place during the management of a service case. While it does not represent the various flows (client, paper, information, etc.) in detail, it does highlight some of the main features of case management, including:

- Two system exits: All service requests/needs are evaluated with the result that (a) the client/applicant is given information per request and/or referred; or (b) services are managed and provided to an eligible client (designated as a primary client) with the result that the client exits the system once objectives are realized.

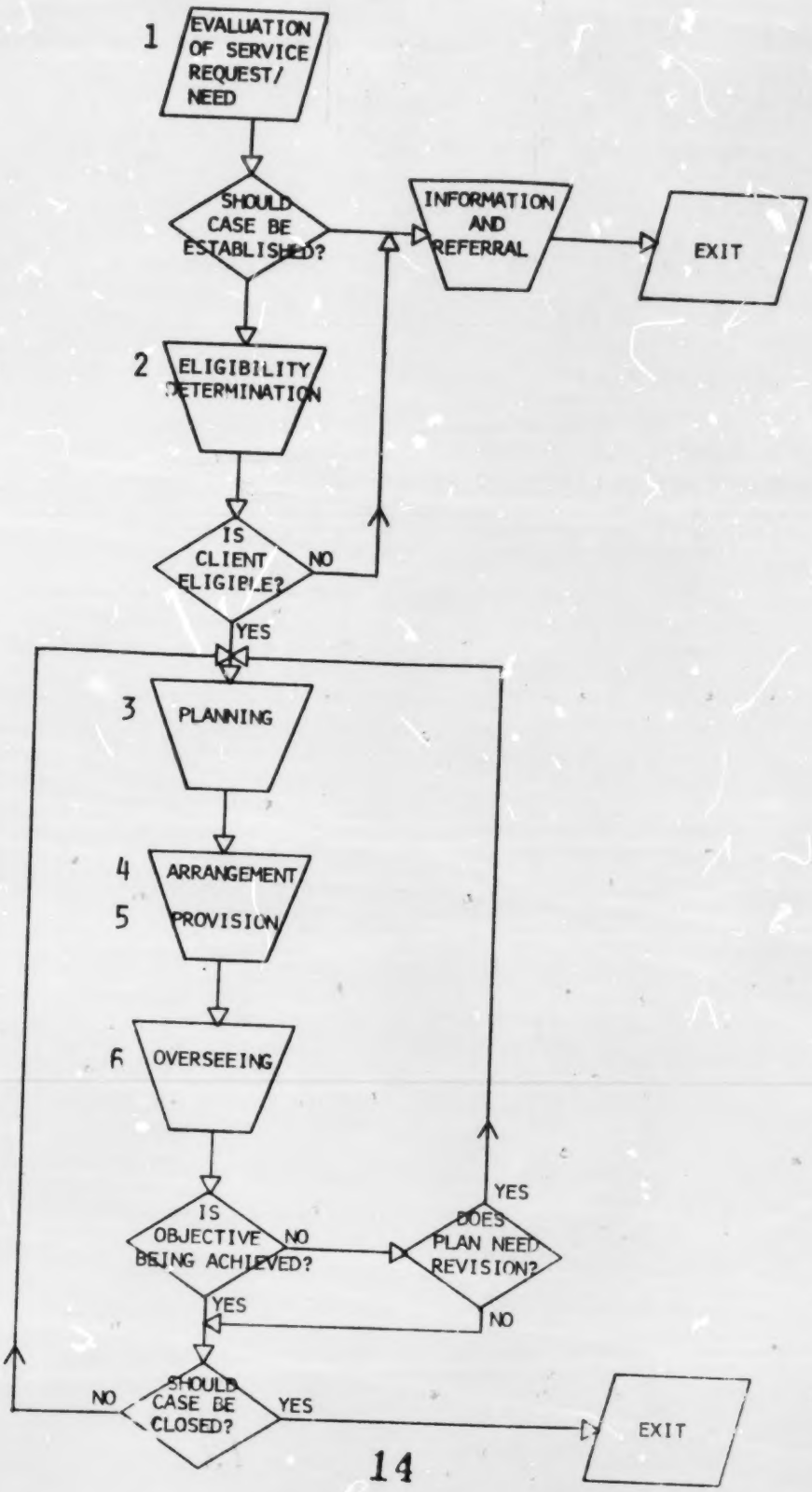
- Five main decision factors:

  (1) Evaluation (screening): Do the facts merit the opening of a case?
  (2) Eligibility: Is the client eligible?
  (3) Planning: Can realistic objectives be set? Are appropriate services available/accessible?
  (4) Assessment: Are case objectives being achieved? Should the case plan be altered?
  (5) Termination: Should the case be closed?

- Iteration: Following case initiation, feedback in the form of continuing worker-client dialogue and fact-finding may trigger the repetition of certain

FIGURE 2

CASE MANAGEMENT PROCESS: FUNCTIONAL FLOW



steps. Planning, overseeing and recording are notable in this sense. While falling into a logical, step-by-step order they also pervade the process, with an aim to synthesize case actions and events.

A few additional case management characteristics are not apparent in the diagram, but need to be mentioned:

- Primary Client: Primary clients are those individuals for whom a service case is opened. Cases are commenced on the basis of an evaluation of the service request or need, and only when (a) objectives/goals and reasonable milestones can be set; (b) services are readily available.

- Worker-Client Consensus: The entire process is geared to worker-client collaboration. The evaluation, planning and overseeing/assessment steps are especially committed to this condition.

  The extent and intensity of consensus will vary, of course, depending on case classification (e.g., consensus would be at a minimum in protection type cases) and other factors.

- Recording: While this element can be logically abstracted from the case management construct, in practice it is on-going and implicit in each of the other steps. It is defined in contrast to a reporting function and, as such, has no necessary bearing on data compilation for information system purposes.

  It represents a commitment of the case management process to record or track a client's progress from the standpoint of (a) case management decisions and actions; (b) problem definition; (c) services provided and (d) outcomes in terms of objectives reached.

Process Steps and Requirements

As a structure or set of requirements around which work can be organized and carried out, case management is made up

of a series of seven separable but inter-connected sets of activity:

- Evaluation of Request/Need
- Eligibilty Determination of the Client/Applicant
- Planning for the Arrangement and/or Provision of Services
- Arranging for Service Delivery
- Provision of Services
- Overseeing
- Recording

1. Evaluation of Request/Need: Conceived as that decision point which determines subsequent courses of action, the evaluation of a request or need for services is perhaps the most crucial step. Two concepts are important to the evaluative purpose of this step:

- Whether on the basis of a request or a need (i.e., those situations which dictate intervention, such as the need for protection), access to the system is made by the very fact of initial worker-client/applicant dialog. While the client/applicant is at the point of entry, the system door is not opened until the reasonableness or appropriateness of the request/need has been established.

- The threshold of service delivery is crossed once the request/need has been screened on two major counts: (a) eligibility status of the client and (b) problem identification. Obviously, judgment factors are at work in both aspects of screening. In this regard, one distinction needs to be made: At this beginning stage of the process the determination of eligibility is necessarily perfunctory. Since a more scrutinizing eligibility assessment is scheduled in the ensuing step, at this point prima facie evidence and best-guess are the rule.

As to screening for the purpose of problem identification, this is an activity which begins with a general assessment and gradually culminates in a detailed assessment of the case from both the client's and the agency's standpoint.

The gathering, assessment and sorting-out of information are at the core of this step's activity. The extent to which they will apply on a case-by-case basis depends on judgments about what the next step is, if any. In most instances three possibilities are conceivable:

- the client/applicant needs information only;
- in addition to or in lieu of information the client/applicant needs specific referral; or
- on the basis of the client's current situation and eligibility status, and in keeping with agency capacities, a case must be opened (i.e., services arranged and/or provided to a designated primary client).

The overriding pattern is one of increasing detail and case commitment: That is, involvment with clients, along with case management activities, is minimal in information-only cases. Situations which call for referral require greater worker-client interaction including direct help for the client in making the referral connection, along with other necessary management responsibilities. Once a primary client case has been established, involvement and management activities intensify, of course.

This point concerning the relative degree of case management and interaction needs to be underscored. The point of emphasis is that at the very outset of the case management process, and continuing throughout its various steps, worker time and agency resources are viewed as premiums. Accordingly,

referrals are made and cases are opened only when feasible, that is when results are in real prospect and when a definite timeframe can be established.

2. Eligibility Determination: Not everyone is eligible to receive social services. This simple fact represents a fundamental system condition. It also places a critical decision responsibility on agency staff. For one thing, eligibility is the single most important factor in determining whether or not a case can or should be opened.

As the criterion on which (a) Federal participation is calculated and (b) the state's social service plan is devised, it introduces some very formal requirements into the case management process. These requirements are spelled out in legislation, regulations and state policies and procedures. In addition to certain obligations which define the worker-client relationship (e.g., civil rights, grievance procedures, and the like), the worker is required to complete various documents and reporting forms on each client/applicant.

The determination of the primary client status is basic to what is typically called the eligibility determination process. While this so-called process means that a case manager must take on responsibility for (a) a social service information function (i.e., initiating and maintaining information system data reporting forms) and (b) interfacing with

other service providers and/or other determinators of eligibility (e.g, AFDC payments), it also reinforces the timeframe consideration and the screening intention of the case management evaluation step. Consequently, in addition to building in a means for assuring compliance with federal funding and state planning requirements, the determination of eligibility represents a necessary step between evaluation and case planning. As a separate step in the case management process, it is more detailed and rigorous in its fact-finding and scope than the screening initiated during evaluation. As a decision point, it leads either to (a) a system exit or (b) an opened case.

While eligibility is a critical factor, it is not the sole criterion for opening a case or for moving on in the case management process. Other system conditions, notably the availability of services, must be brought to bear before the additional work of planning and provision can take place.

3. Planning: As in the instance of eligibility determination, the planning step is in part a carry-over from the evaluation effort, especially regarding problem definition and fact-finding. Also, this step continues the emphasis on client involvement, with the client representing a prime information source. Differences at this stage of the process are more than merely differences in degree, however.

In addition to delving into the problem(s) at hand (including background, possible causation and past ameliorative efforts), planning brings two essential system conditions into focus. With the obvious exception of eligibility, these factors in effect determine who gets served:

- Service availability governs the case opening decision and functions as a prelude to other case decisions, including planning. As an environmental or system determinant, it relates to what is practical and realistic per client service request and/or needs. On a case-by-case basis, it answers to the question of what must be done to facilitate and manage services. Accordingly, such issues as service need and availability, along with the conditions for providing services, are made part of the planning activity.

  The ways in which these issues will be dealt with not only influence the extent and complexity of case management; they also underscore the importance of a paramount corollary in the planning step: setting case objectives.

- The setting of objectives is essential to planning and to just about everything else concerning the management and delivery of services. Without objectives there is no basis for evaluation, and planning is impossible.

  As in the case of planning, objectives are subject to modification. Obviously, plans and objectives are merely references. Also, in keeping with a basic theme of case management, objectives result from client-worker interaction.

  The objective-setting aspect of case planning serves one additional purpose, basically having to do with a non-case management function. That is, objectives represent the basis for setting goals in accordance with Title XX requirements. In turn, goal assignments constitute one of the data elements for case reporting in the social services information system.

Insofar as case management is concerned, planning is viewed as an informed guessing process in which the service recipient and others concerned with the case are willing adjuncts. In the narrowest sense the process results in a case plan which reflects short and long range (prioritized) objectives for arranging, providing and overseeing services to specific clients.

4. Arrangement: As a major step toward achieving case objectives, arrangement for the provision of service(s) calls for worker initiatives in designating and establishing client contact with service providers. The exact nature of the arrangement activity is shaped by the type and availability of service(s) on two counts:

- Intra-agency: arrangements for service are based on internal procedures covering direct provision or purchase of services.
- Inter-agency: referrals made to outside agencies in behalf of clients (a variety of agency policies and procedures may be applicable).

As to actual activities involved in arrangement, these may range from seeing that a client's service-implicated transportation needs are met to the more ordinary tasks of setting up appointment schedules for the client. Depending on circumstances, the most taxing task is likely to be one of interpreting and dealing with the policies and procedures that govern service access.

The main point of arrangement is that for one reason or another (notably the maze-like system of diverse agencies, rules, regulations) clients need help in making and sustaining connections with service providers. It is part of the case manager's role to see to it that these connections are made and kept as required by the client's service objectives. In this view, whether the connections are made in terms of the inter-or intra-agency variety, the case manager takes on the role of advocate or go-betweer for the client.

5. Provision: Obviously, with the possible exception of recording and eligibility determination, the provision of services is the most tangible, concrete activity of the case managment process. It is the most sharply defined and conceptually distinct, and also the most directly operational element in case management. It centers on what in the final analysis the process is all about: serving eligible clients.

Its distinction as a case management activity is twofold:

- Service provision is distinguished by its content and method and, as such, depends on laws and policies for its meaning.
- While contrasted to other case management activities, services are provided in the context of other case management activities.

Depending on the arrangements made in accordance with policies, client needs and available resources, services normally are provided by direct means (i.e., provided by the

service agency) or "indirectly" by purchase (i.e., from private or public vendors).

The extent to which a worker will be involved in the provision of services obviously depends on a number of factors, including (a) the worker's expertise (b) the size of an agency and the degree to which its staff is specialized (c) the particular case objectives of the client(s) and (d) the method(s) (i.e., direct or purchase) by which service is delivered.

This range of possible worker involvement in the service provision activity gives emphasis to the various kinds of responsibilities which a case manager must assume. This view of fixed responsibility and case assignment in a multi-service, multi-provider environment is central to the case management concept. Therefore, in carrying out case management requirements a worker may function solely or simultaneously as a service provider and/or a case manager.

6. Overseeing: Once a service case is established, oversight begins. This is an on-going activity and involves several concerns about client progress and other case particulars. The overriding concern is whether service provision is proceding according to plan: Are objectives being met in accordance with milestones? Are any changes in order?

In the main, overseeing is a monitoring activity which gauges a service recipient's current status against expectations (i.e., the case plan). The results of monitoring make up the basis for assessing the rightness of the case plan, the impact of services and the continued relevance of conclusions reached during evaluation. Consequently, the observations made as part of overseeing are also the basis for making decisions on what to do next, particularly with regard to the decision points specified in the case management process. Judgments of this kind may range from affirmation of the plan to some degree of corrective action.

In case management terms, in the light of monitoring results one or more of the steps may have to be repeated: eligibility may have to be re-determined, service needs may have to be re-evaluated, and so on.

In its case management context, overseeing makes two additional demands:

- For obvious reasons the assessment of monitoring results should involve the client at some point.
- Since meeting client needs may mean the involvement of other service providers, it will be necessary for the case manager to contact other agency staff regarding assessment and any decisions which may affect client status.

7. Recording: The systematic documentation of case management activities, including decision and decision factors, is part of what case management is all about. Record-keeping is an aspect of each of the required steps in the case management process. Accordingly, it is an on-going responsibility.

While recording obviously deals with data, and while it can be useful as a basis for meeting requirements specified by an information system, it must not be confounded with reporting data for information system purposes. On the contrary, recording has a separate, case management identity. In contrast to the management and control purposes of reporting, data compiled and kept as part of the case management record are intended primarily for the purpose of immediate line staff access and use. In addition to tracking the client and providing a basis for local communication, case management records facilitate supervision and make routine case transfers possible. For these reasons, while the data elements in some respects may be the same, the purpose and application of the data are significantly different.

By way of further contrast, recording is instrumental to the management of service cases, whereas reporting is imposed by information system requirements that are geared to central office system planning, resource allocation, federal reporting and allied needs.

Of course, much depends on what is in a record. Ideally, the recording criteria will be standarized and organized enough so that the record will communicate and be useful across jurisdictional and professional boundaries. Attention to this kind of detail will ease implementation of the recording requirement and result in a more effective application of case management.

The point made by case management is that some form of recording is an absolute requirement, no matter how problematic its implementation may be.

CHAPTER III

Implementation of Case Management: Issues and Implications

In one form or another and in varying degree, the process we call case management is being followed by numerous service agencies and staff. As currently practiced, case management may be piecemeal and fragmentary, but the concern for a toughening of procedure is common to all these efforts. This concern for procedure and system obligation underlies the case management model.

As mentioned at the beginning, the model presented in these manuals is derived from a combination of analysis and readings in a growing literature on subjects relating to case management. Most significantly, however, it derives its emphasis about what is practical and useful from the experience and knowledge of service staff. Accordingly, its conception as an organizing principle for the delivery and management of social services is based on what agency workers have to do to work against the problems of service delivery.

Seven requirements or steps have been identified and pieced together to form a process and to bring about integrated case actions. In effect, the case management model asserts that if the management of services is to be taken seriously, then the requirements of the process must be met.

Implementation of the process should not make a prison out of routine. On the other hand, if the seven minimum requirements are not met, then it can only rightly be supposed that management is nonexistent, and that clients and system alike are adrift.

The ways and means for accomplishing each of the required steps are described in a separate volume in terms of activities, tasks and techniques. Except as may be the case from a legal or regulatory standpoint (Title XX eligibility determination, for instance), these are suggestions; other approaches may be preferred. The point to be made is that (a) the seven steps of the process are requirements and (b) there are alternative approaches for doing the job specified by the requirements.

Implementation of the case management process obviously is not without its issues and problems. Indeed, the point frequently made in this manual is that case management results from what seems to be an inescapable condition of service delivery and organization itself, particularly the problem of horizontal integration. At any rate, it is difficult to set uniform requirements in motion when a variety of sometimes contradictory organizational and program factors operate.

Conceivably, the process can be put into operation on a basis ranging from line agency adaptation all the way to a total human services approach.

In any event, implementation depends on numerous considerations about what is desirable and practical. For a number of reasons it may not be possible to commit a system fully or even partially to case management. Bureaucratic resistance may work against cross-boundary coordination. Conflicting interests may negate the positive effects of case management. In one form or another reorganization may be underway. These and other factors necessarily condition any efforts to operationalize the case management process.

Whatever shape may be given to the work of implementation--whether by unit, agency, division, department, or what have you--policy direction from the proper authority is pre-requisite. The policy itself, and the extent of its application, will depend finally on decisions based on some of the following issues and reflections:

- When multiple services are involved, who is responsible as the case manager? When interagency and/or multiple program specialities are pertinent to a given case/primary client, some decision rules as to where management responsibility resides are needed. Two approaches appear most plausible: (a) a case management team comprised of case participants, with case manager responsibility being made on assignment by team members or (b) responsibility can be placed at the point of system entry (i.e., agencies which initiate a primary client would automatically hold responsibility for managing the case).

- Case management requirements hold a general application regardless of service type or method. However, given the special legal and procedural characteristics of some services, the process itself or selected steps in the process may have to be more precisely tailored to program requirements. For instance, protective services are given on the basis of need. They are means for intervention and are carried out without regard to income or other criteria. Consequently, the eligibility determination requirement is waived from the process.

  Other modifications may also be in order on a step-by-step basis to accomplish service objectives within the case management process. Client involvement, for instance, may be curtailed for reasons of service design. The details of screening, assessment and evaluation may vary from service to service. Overall, adjustments can be made while retaining the deliberate coordination and centralizing role of the process.

- Clearly, case management involves a number of staffing and manpower considerations. The size and degree of specialization of an organization obviously condition the way in which case management requirements can be met; the assignment of case management responsibility is likewise affected.

Social services are delivered through a variety of public and private agencies ranging in size from single worker operations to the larger, more complex organizations typical of metropolitan areas. Larger organizations are likely to be highly specialized. Consequently, case management may be centralized and service provision specialized by unit or other assignment.

Similarly, other case management activities could be specially assigned to individual staff, although such fragmentation of the process would be undesirable. What is

plausible, and in fact operative, is the specialization of case management, service provision, the screening/ intake portion of evaluation and perhaps even overseeing. This may prove to be too unwieldy a version of the process, but it is at least theoretically possible to meet case management requirements in this way.

In contrast, smaller sized agencies will tend to the more generalist case management approach, meaning that service provision and other case management activities are combined. It is highly probable that in this version all workers will be individually responsible for meeting management requirements for clients assigned to them.

These possibilities are mentioned for the sake of emphasizing the variance that is possible. In practice, the extent to which any approach applies will be a matter of degree and, finally, administrative judgment.

In some respects judgment about the implementation strategy will be a matter of forebearance on at least two counts:

1. Case management is like everything else in the public arena; it can not be imposed. Rather, agreement about its value and commitment to its methods must pervade the full scope of its attempted implementation.

2. Even if consensus about the desirability and usefulness of the model is reached in an organization, it is not realistic to bring everybody on board at once. For one thing, the dominant interests and values of

> the system need to be clarified before the full extent of case management can be deployed. Consequently, a preferred option may be to identify an agency or subsystem most attuned to meeting case management requirements, and begin there on a pilot or early-implementation basis.
>
> On both counts, the implementation of the model is a matter of gradual unfolding. These manuals represent a first step in this direction and are basic to the needed analysis and training.

At the same time, there is no pretense in this manual to cover all the issues that might impinge on making the case management process a viable prospect for all manner of service delivery systems. The same caveat holds for Volume II, which describes the details of the process, along with some methods for meeting its requirements.

Along with its companions, this volume holds the orientation and training of staff as its chief purpose. In its final comments it also strives to point out that when we gauge what must be done to accommodate case management requirements, not only is there a pressing need for detailed analysis in order to establish decision rules and implementation preferences, but those who make policy must see to its commitment throughout their lines of authority.